PERSONAL SERVICES BREAKDOWN



NEBRASKA OFFICE OF HIGHWAY SAFETY 5001 South 14th St., Lincoln, NE 68512 PO Box 94612, Lincoln, NE 68509-4612

(402) 471-2515 Fax: (402) 471-3865

Contractor:				Contractor Title:						Contract Number:		
Number of H	ours for Month:											
									Miscellaneous Expenses			
Pay Period Time	Name / FTE % as Per Contract	Hourly Wage	Number of Hours Worked	Maximum Reimbursable Hours this Month Based on FTE %	Reimbursable Wage	Retirement	FICA	Unemployment				Total Compensation
Employee/Employee's Signature's (Provide Signature and Print Name) Date							Preparer's Signature Da					Date